APPLICATION FORM FOR WINNESHIEK COUNTY BOARD/COMMISSION

Please Return To:

Winneshiek County Board of Supervisors, 201 W Main St. Decorah, IA 52101 Phone: (563) 382-2370 Fax: (563) 387-4083 Website: www.winneshiekcounty.org

Application For:	(Board/Commission)	
Date	E-mail Address	
Name		
Address		
Phone Number	Fax Number	
Business Phone	Cell Phone	
	ating the qualifications of applicants for appointment to a board or commission. State law require balance most appointive boards, commissions, committees, and councils according to gender	
	and/or activities such as hobbies, volunteer work, etc. that you fe	
may qualify you for this position):		
The following questions will assist How much time will you be willi	e Board of Supervisors in its selection.	
	e in detail why you are interested in serving on a county board or	
commission. Include information :	out your background that supports your interest.	
Contributions you feel you can n	Re to the Board/Commission:	

■ Direction/role you perceive of this Board/Commission:					
	of/in addition to the office of the office o	he above, do you have any?	comments to add tha	nt may assist the Board of	
■ Please	provide two referen	nces who may be contacted of	on your qualifications Email address	for this position. Relationship	
	1 Kdd1033	Thone number	Email address	Telutionship	
I certify that	at there is nothing that	would prohibit me from serving	on this board or commis	sion.	
Signature	2	Da	te		

YOUR APPLICATION WILL BE RETAINED IN OUR FILES FOR ONE YEAR
THIS APPLICATION IS A PUBLIC DOCUMENT AND AS SUCH CAN BE REPRODUCED AND
DISTRIBUTED FOR THE PUBLIC.